Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF WASHINGTON	=	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Tina First name Marie Middle name Wright Last name and Suffix (Sr., Jr., II, III)	Dorri First name Jamar Middle name Wright Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Tina Marie Covert Tina Marie Henry	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6384	xxx-xx-6249

Official Form 101

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs
Where you live	8616 Sweetrier Lp SE	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Thurston County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) EINs Where you live 8616 Sweetrier Lp SE Olympia, WA 98513 Number, Street, City, State & ZIP Code Thurston County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

	Debtor 1				Case number (if known)		
Par	t 2: Tell the Court About	our Bankrupto	cv Case				
7.	The chapter of the Bankruptcy Code you are	Check one. (Fe	or a brief description	n of each, see <i>Notice Required by</i> of page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankrupto e box.	су	
	choosing to file under	■ Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		☐ Chapter 13					
		·					
8.	How you will pay the fee	about ho order. If a pre-pri	ow you may pay. Ty your attorney is sub inted address.	pically, if you are paying the fee you be be proposed to be provided by the proposed to be provided by the pro	k with the clerk's office in your local court for more de ourself, you may pay with cash, cashier's check, or m alf, your attorney may pay with a credit card or check	oney with	
				stallments. If you choose this option to (Official Form 103A).	on, sign and attach the Application for Individuals to F	Pay	
		☐ I reques	st that my fee be w	vaived (You may request this option e your fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge r ur income is less than 150% of the official poverty lin	e that	
					n installments). If you choose this option, you must fill cial Form 103B) and file it with your petition.	l out	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	idet o youre.		trict	When	Case number		
				When	Case number		
		Dis	trict	When	Case number		
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		De	btor		Relationship to you		
		Dis	trict	When	Case number, if known		
		De	btor		Relationship to you		
		Dis	trict	When	Case number, if known		
11.		□ No. G	o to line 12.				
	residence?	■ Yes. H	as your landlord ob	tained an eviction judgment agains	t you?		
			No. Go to line	e 12.			
			Yes. Fill out <i>li</i> bankruptcy pe		Judgment Against You (Form 101A) and file it with th	is	

Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full or part-time business? Yes. A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such partnership, or LLC. If you have more than one sole proprietorship, use a separates beste and attacts it to this petition. Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Commodity Broker (as defined in 11 U.S.C. § 101(51B)) Commodity Broker (as defined in 11 U.S.C. § 101(51B)) One of the above 13. Are you filling under Chapter 10 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). No. I am not filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate or a small business debtor according to the definition in the Bankruptcy Code. Post 3 efficient of small business debtor, see 11 U.S.C. § 101(51D). Yes. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. Under the property of Any Property That Needs Immediate Attention Yes. On own any property that posso or is mediate attention? For example, do you own priorshable goods, or Ilivestock that must be fed, or a building that needs Use the property? Vestor of you do wan any property that needs Ilives the property? Vestor as building that needs Vestor as the property? Vestor as the property? Vestor as building that needs Vestor as the property as the property? Vestor as building that needs Vestor as		tor 1 Tina Marie Wright tor 2 Dorri Jamar Wrigh		Case number (if known)	
As log proprietorship is a business you operate as an individual, and is not a sparate legal entity such as a corporation, partnership, or LLC. Yes. Name and location of business Name of business, if any					
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. **Check the appropriate box to describe your business:** Check the appropriate box to describe your business:** If you are filling under Chapter 11, the court must know whether you are a small business debtor see that it can set appropriate box to describe your are a small business debtor, you must attach your most recent balance sheet, st	Part	3: Report About Any Bu	sinesses	You Own as a Sole Proprietor	
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such a speciation (spall entity such a separate legal entity such a separate legal entity such a separate sheet and attach it to this petition. Number, Street, City, State & ZIP Code	12.	of any full- or part-time	■ No.	Go to Part 4.	
Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separates heet and attach it to this petition. Mumber, Street, City, State & ZIP Code Number, Street, City			☐ Yes.	Name and location of business	
Number, Street, City, State & ZIP Code		business you operate as an individual, and is not a separate legal entity such as a corporation,		Name of business, if any	
Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(57A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Commodity Broker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(63A)) None of the above 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you as mall business debtor as a small business debtor? For a definition of small business debtor? For a definition of small business debtor of the seed of the s		If you have more than one sole proprietorship, use a		Number, Street, City, State & ZIP Code	
Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(65)) None of the above None of the above				Check the appropriate box to describe your business:	
Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above Value of the above					
Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor so that it can set appropriate deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 101(51D). No. I am not filing under Chapter 11.					
None of the above				Stockbroker (as defined in 11 U.S.C. § 101(53A))	
None of the above				Commodity Broker (as defined in 11 U.S.C. § 101(6))	
Chapter 11 of the Bankruptcy Code and are you a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(S1D). No. I am filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. Yes. What is the hazard? I immediate attention? No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard in public health or safety? Or do you own any property that needs immediate attention? For example, do you own property that needs immediate attention? For example, do you own property that needs immediate attention? Where is the property? Where is the property?				☐ None of the above	
For a definition of small business debtor, see 11 U.S.C. § 101(51D). No. I am not filing under Chapter 11.	13.	Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	deadline operation	s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemer is, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proced	nt of
business debtor, see 11 U.S.C. § 101(51D). I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. Yes. No. Yes. What is the hazard? What is the hazard? If immediate attention is needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property?			■ No.	I am not filing under Chapter 11.	
Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? No. What is the hazard? If immediate attention is needed? Where is the property? Where is the property?		business debtor, see 11	□ No.		otcy
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? No. ∀es. What is the hazard? If immediate attention is needed? Where is the property?			☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy C	ode.
In the property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? In the property what is the hazard? What is the hazard? If immediate attention is needed, why is it needed? Where is the property?	Part	4: Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention	
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? What is the hazard? What is the hazard? If immediate attention is needed? Where is the property?		Do you own or have any			
of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? What is the hazard? What is the hazard? If immediate attention is needed, why is it needed? Where is the property?					
property that needs immediate attention? If immediate attention is needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? If immediate attention is needed? Where is the property?		of imminent and identifiable hazard to public health or safety?	— 163.	What is the hazard?	
perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?		property that needs			
Number, Street, City, State & Zip Code		perishable goods, or livestock that must be fed, or a building that needs			
		•		Number, Street, City, State & Zip Code	

Debtor 1 Tina Marie Wright
Debtor 2 Dorri Jamar Wright

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy
Case 19-41914-BDL Doc 1 Filed 06/10/19 Ent. 06/10/19 16:36:46 Pg. 5 of 62

	otor 1 Tina Marie Wrightotor 2 Dorri Jamar Wrig			(Case number (# k	nown)	
Par	t 6: Answer These Ques	tions for R	Seporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b.				
		16b.	■ Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.	□ No. Go to line 16c.			
		16c.	☐ Yes. Go to line 17. State the type of debts you owe th	at are not consumer debt	s or business de	bts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be availabl	u estimate that after any e e to distribute to unsecure	exempt property ed creditors?	is excluded and administrative expenses	
	are paid that funds will be available for distribution to unsecured creditors?	1	☐ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	199	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?	□ \$100	\$50,000 001 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	□ \$1,000,001 - \$10 mil □ \$10,000,001 - \$50 n □ \$50,000,001 - \$100 n □ \$100,000,001 - \$500	nillion million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	\$100	\$50,000 001 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	□ \$1,000,001 - \$10 mil □ \$10,000,001 - \$50 n □ \$50,000,001 - \$100 n □ \$100,000,001 - \$500	nillion million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
Par	t 7: Sign Below						
For	you	I have ex	xamined this petition, and I declare u	under penalty of perjury th	at the information	on provided is true and correct.	
			have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, ited States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
			orney represents me and I did not pa nt, I have obtained and read the noti			attorney to help me fill out this	
			t relief in accordance with the chapte		•	·	
		bankrupt and 357	1.	50,000, or imprisonment for	or up to 20 years	s, or both. 18 U.S.C. §§ 152, 1341, 1519,	
		Tina Ma	n Marie Wright arie Wright e of Debtor 1	Dorri .	rri Jamar Wrig Jamar Wright ure of Debtor 2		
		Execute	d on June 10, 2019 MM / DD / YYYY	Execut	ed on June 1	0, 2019 D/YYYY	

Debtor 1 Debtor 2	Tina Marie Wright Dorri Jamar Wrigh		Case number (if known)				
epresent	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this petitio under Chapter 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also certify that I h	ites Code, and have enave delivered to the	explained the relief avidebtor(s) the notice re	ailable under each chapter equired by 11 U.S.C. § 342(b)		
	not represented by ey, you do not need a page.	and, in a case in which § 707(b)(4)(D) applies, certi schedules filed with the petition is incorrect.	(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the on is incorrect.				
	. •	/s/ Ellen Ann Brown	Date	June 10, 2019			
		Signature of Attorney for Debtor		MM / DD / YYYY			
		Ellen Ann Brown 27992 Printed name					
		Brown and Seelye Firm name					
		744 S Fawcett Ave					
		Tacoma, WA 98402 Number, Street, City, State & ZIP Code					

Email address

Contact phone **253-573-1958**

27992 WA Bar number & State StopDebt@gmail.com

Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy Case 19-41914-BDL Doc 1 Filed 06/10/19 Ent. 06/10/19 16:36:46 Pg. 7 of 62

Fill	in th	is information to identify your case:		
	otor 1	Tina Marie Wright		
Dec	7.01	First Name Middle Name Last Name		
1	otor 2			
` '				
Unit	ted S	tates Bankruptcy Court for the: WESTERN DISTRICT OF WASHINGTON		
		mber		
(if kn	own)		_	Check if this is an mended filing
			a	inchaca ming
~ (ç	15		
		al Form 106Sum		
		nary of Your Assets and Liabilities and Certain Statistical Information		12/15
info	rmati	mplete and accurate as possible. If two married people are filing together, both are equally responsible ion. Fill out all of your schedules first; then complete the information on this form. If you are filing amer jinal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1:	Summarize Your Assets		
			Yo	our assets
			Va	lue of what you own
1.	Sch	nedule A/B: Property (Official Form 106A/B)	•	0.00
	1a.	Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b.	Copy line 62, Total personal property, from Schedule A/B	\$	60,087.00
	1c.	Copy line 63, Total of all property on Schedule A/B	\$	60,087.00
Par	t 2:	Summarize Your Liabilities		
			Va	our liabilities
				nount you owe
2.	Sch	nedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
		Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	. \$	46,247.00
3.	Sch	nedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	_	0.00
	За.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	65,892.00
		Your total liabilitie	s \$	112,139.00
Par	t 3:	Summarize Your Income and Expenses		
4.		nedule I: Your Income (Official Form 106I)	\$	8,007.20
	Cop	by your combined monthly income from line 12 of Schedule I	Φ	
5.		nedule J: Your Expenses (Official Form 106J) by your monthly expenses from line 22c of Schedule J	\$	7,835.90
Par	t 4:	Answer These Questions for Administrative and Statistical Records		
6.	Δro	you filing for bankruptcy under Chapters 7, 11, or 13?		
0.		No. You have nothing to report on this part of the form. Check this box and submit this form to the court with y	our othe	er schedules.
		Yes		
7.	Wh	at kind of debt do you have?		
		Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	or a perso	onal, family, or
		Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check to the court with your other schedules.	nis box a	and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1	Tina Marie Wright
Debtor 2	Dorri Jamar Wright

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9,634.15

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	r 1	Tina Marie	e Wright				
		First Name		Middle Name	Last Name		
)ebto Spouse	or 2 e, if filing)	Dorri Jam First Name	ar Wright	Middle Name	Last Name		
			familia MEST				
nited	d States I	Bankruptcy Court	for the: WEST	ERN DISTRICT OF W	/ASHINGTON		
ase	number						☐ Check if this is a
							amended filing
Offic	cial F	orm 106A	<u>/B</u>				
Sch	nedu	ile A/B: F	Property	/			12/15
					. If an asset fits in more than	one category, list the asset i	n the category where you
ink it	fits best.	Be as complete ar	nd accurate as po	ossible. If two married pe	eople are filing together, both In the top of any additional pa	are equally responsible for s	supplying correct
	r every qu		eu, attacii a sepai	ate sheet to this form. O	on the top of any additional pa	iges, write your mame and ca	se number (ii known).
art 1:	Describ	be Each Residence	. Building, Land.	or Other Real Estate You	u Own or Have an Interest In		
are	D000	50 <u>Laon Robidonos</u>	, Danaing, Lana,	or other rear Estate 10.	a own or riave an interest in		
Do y	ou own o	or have any legal or	equitable interes	st in any residence, build	ding, land, or similar property	?	
■ N	lo. Go to F	Part 2.					
ПΥ	es. When	e is the property?					
	_	p					
	B	be Your Vehicles					
o you omeo Car	u own, le ne else c	ease, or have leg drives. If you lease	e a vehicle, also		es, whether they are regist G: Executory Contracts and		vehicles you own that
o you omeo	u own, le ne else c rs, vans,	ease, or have leg drives. If you lease	e a vehicle, also	report it on Schedule (vehicles you own that
o you omeo Car	u own, le ne else c rs, vans,	ease, or have leg drives. If you lease	e a vehicle, also	report it on <i>Schedule</i> (Unexpired Leases. Do not deduct secured	claims or exemptions. Put
o you omeo . Car 	u own, le ne else d rs, vans, lo 'es	ease, or have leg drives. If you lease trucks, tractors,	e a vehicle, also	report it on <i>Schedule</i> (hicles, motorcycles Who has an interest	G: Executory Contracts and	Do not deduct secured the amount of any secu	,
o you omeo Car	u own, le ne else c rs, vans, No 'es	ease, or have leg drives. If you lease trucks, tractors, Nissan	e a vehicle, also	report it on <i>Schedule</i> (G: Executory Contracts and	Do not deduct secured the amount of any secu Creditors Who Have Ck	claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property.
o you omeo Car	u own, le ne else c rs, vans, No Yes Make: Model: Year:	ease, or have leg drives. If you lease trucks, tractors, Nissan Titan	e a vehicle, also	who has an interest in Debtor 1 only	G: Executory Contracts and in the property? Check one	Do not deduct secured the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D</i> :
omeo Car	u own, le ne else c rs, vans, lo Yes Make: Model: Year: Approxim	ease, or have leg drives. If you lease trucks, tractors, Nissan Titan 2015	e a vehicle, also	who has an interest in Debtor 1 only Debtor 2 only	in the property? Check one	Do not deduct secured the amount of any secu Creditors Who Have Ck	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the
o you omeo Car	u own, le ne else c rs, vans, lo Yes Make: Model: Year: Approxim	ease, or have legatrives. If you lease trucks, tractors, Nissan Titan 2015 Tate mileage:	e a vehicle, also	who has an interest is Debtor 1 only Debtor 1 and Debtor 1 and Debtor 1 and Debtor 2 only	in the property? Check one or 2 only debtors and another	Do not deduct secured the amount of any secu Creditors Who Have Ck	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the
o you pomeo	u own, le ne else c rs, vans, No Yes Make: Model: Year: Approxim Other info	Nissan Titan 2015 nate mileage: ormation:	e a vehicle, also	who has an interest in Debtor 1 and Debtor 1 and Debtor 1 and Debtor 1 and Debtor 2 content of the Check if this is content of the Check if this is content of the Check instructions)	in the property? Check one or 2 only debtors and another ommunity property	Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property? \$25,871.00	claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property. Current value of the portion you own?
o you omeo Car	wown, leader of the control of the c	Nissan Nissan Nissan Nissan Nissan Nissan Nissan	e a vehicle, also	who has an interest in Debtor 1 and Debtor 1	in the property? Check one or 2 only debtors and another	Do not deduct secured the amount of any secu Creditors Who Have Ck Current value of the entire property? \$25,871.00 Do not deduct secured the amount of any secu	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$25,871.00
O you come o	wown, leader of the control of the c	Nissan Titan 2015 nate mileage: ormation: Nissan Altima	e a vehicle, also	who has an interest in Debtor 1 and Debtor 1 and Debtor 1 and Debtor Debtor 2 check if this is confused in the Debtor 1 and Debtor 1 check if this is confused in the Debtor 1 only	in the property? Check one or 2 only debtors and another ommunity property	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? \$25,871.00 Do not deduct secured the amount of any secu Creditors Who Have Classification Creditors Who Have Classification Control Con	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$25,871.00 claims or exemptions. Put red claims on Schedule D: aims Secured by Property.
O you come o	wown, leader of the control of the c	Nissan Nissan Nissan Nissan Nissan Nissan Nissan	e a vehicle, also	who has an interest in Debtor 1 and Debtor 1	in the property? Check one or 2 only debtors and another ommunity property in the property? Check one	Do not deduct secured the amount of any secu Creditors Who Have Ck Current value of the entire property? \$25,871.00 Do not deduct secured the amount of any secu	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$25,871.00
o you pomeo	wown, leane else consense de la cons	Nissan Titan 2015 nate mileage: ormation: Nissan Altima 2016	a vehicle, also sport utility ve	who has an interest in Debtor 1 only Debtor 1 and Debtor 1 and Debtor 1 check if this is confident (see instructions) Who has an interest in Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only	in the property? Check one or 2 only debtors and another community property in the property? Check one	Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? \$25,871.00 Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$25,871.00 claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the
o you comeo	wown, leane else consense de la cons	Nissan Titan 2015 nate mileage: ormation: Nissan Altima 2016 nate mileage:	a vehicle, also sport utility ve	who has an interest in Debtor 1 only Debtor 1 and Debtor 1 only Check if this is confused in the Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 1 only	in the property? Check one or 2 only debtors and another ommunity property in the property? Check one	Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? \$25,871.00 Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$25,871.00 claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the
Carron A	wown, leane else consense de la cons	Nissan Titan 2015 nate mileage: ormation: Nissan Altima 2016 nate mileage:	a vehicle, also sport utility ve	who has an interest in Debtor 1 and Debtor 1 only Debtor 1 and Debtor 2 constructions) Who has an interest in Debtor 1 and Debtor 1 and Debtor 2 constructions) Who has an interest in Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and	in the property? Check one or 2 only debtors and another ommunity property in the property? Check one	Do not deduct secured the amount of any secu Creditors Who Have Class. Current value of the entire property? \$25,871.00 Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property?	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$25,871.00 claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own?
o you omeo	wown, leane else consense of the series of t	Nissan Titan 2015 nate mileage: ormation: Nissan Altima 2016 nate mileage: ormation:	30000 22000	who has an interest in Debtor 1 and Debtor 1 only Debtor 1 and Debtor 2 check if this is confident and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 1 and Debtor 1 and Debtor 1 check if this is confident and Debtor 1 an	in the property? Check one or 2 only debtors and another ommunity property in the property? Check one	Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the entire property? \$25,871.00 Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the entire property? \$19,376.00	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$25,871.0

Official Form 106A/B Schedule A/B: Property page 1

Debto Debto		Tina Marie V Dorri Jamar	•	Case number (if known)
				ntries from Part 2, including any entries for=>	\$45,247.00
	_				
			onal and Household Items	a fallandar itama?	Comment value of the
ро ус	ou ow	n or nave any i	legal or equitable interest in any of th	e following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex	ample No	old goods and fes: Major appliar	furnishings nces, furniture, linens, china, kitchenwar	е	
	103.	Describe			
			Used Household Goods and Fu	ırnishings	\$3,500.00
	ample No	s: Televisions a	and radios; audio, video, stereo, and digi I phones, cameras, media players, game	ital equipment; computers, printers, scanners; music es	collections; electronic devices
			Computers, game consoles, tal and other electronic equipment	blets, stereo equipent, cell phones, t	\$1,000.00
Ex	ample No		I figurines; paintings, prints, or other artvions, memorabilia, collectibles	work; books, pictures, or other art objects; stamp, coi	n, or baseball card collections;
Ex		ent for sports a es: Sports, photo musical instr	ographic, exercise, and other hobby equ	ipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
		Describe			
	xamp No		s, shotguns, ammunition, and related ec	quipment	
11. CI	othes xamp No	;	othes, furs, leather coats, designer wea	r, shoes, accessories	
			Clothing		\$1,000.00
	<i>xamp</i> No		welry, costume jewelry, engagement rin	gs, wedding rings, heirloom jewelry, watches, gems,	gold, silver
					
	<i>xamp</i> No	m animals les: Dogs, cats,	birds, horses		
		Describe		la A/D. Dranarh	
Officia	ı Form	n 106A/B	Schedu	le A/B: Property	page 2

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Debtor 1 Debtor 2	Tina Marie Wright Dorri Jamar Wright	Case number (if known)	
	Family Pets		\$20.00
■ No	ther personal and household items you did	d not already list, including any health aids you did not list	
	the dollar value of all of your entries from art 3. Write that number here	Part 3, including any entries for pages you have attached	\$5,720.00
Part 4: De	escribe Your Financial Assets		
	wn or have any legal or equitable interest	in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	ples: Money you have in your wallet, in your l	home, in a safe deposit box, and on hand when you file your petit	ion
		Cash on hand	\$20.00
	sits of money ples: Checking, savings, or other financial ac institutions. If you have multiple accoun	ecounts; certificates of deposit; shares in credit unions, brokerage ats with the same institution, list each.	houses, and other similar
		Institution name:	
	17.1.	Checking and/or savings: Twinstar, Red River FCU, Wells Fargo	\$500.00
Exam ■ No	s, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with b		
19. Non-p		porated and unincorporated businesses, including an intere	st in an LLC, partnership, and
■ No □ Yes.	Give specific information about them Name of entity:		
Nego	nment and corporate bonds and other neg tiable instruments include personal checks, con negotiable instruments are those you cannot t	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
☐ Yes.	Give specific information about them Issuer name:		
	ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 401(k),	, 403(b), thrift savings accounts, or other pension or profit-sharing	y plans
☐ Yes.	List each account separately. Type of account:	Institution name:	
Your		so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications compa	nies, or others

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Schedule A/B: Property

Official Form 106A/B

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page 3

	ebtor 1 ebtor 2	Tina Marie Dorri Jam			(Case number (if known)	
	☐ Yes			Institution n	ame or individual:		
23.	Annuiti ■ No	es (A contrac	t for a periodic pa	yment of money to you, either for	life or for a number of	years)	
	Yes		Issuer name and	description.			
24.			ation IRA, in an a), 529A(b), and 5	account in a qualified ABLE pro 29(b)(1).	gram, or under a qua	llified state tuition progra	m.
	☐ Yes		Institution name	and description. Separately file th	e records of any intere	ests.11 U.S.C. § 521(c):	
		equitable or	future interests	in property (other than anythin	g listed in line 1), and	I rights or powers exercis	sable for your benefit
	■ No □ Yes.	Give specific	information about	them			
	Examp ■ No	les: Internet d	omain names, we	de secrets, and other intellectuebsites, proceeds from royalties a		nts	
	☐ Yes.	Give specific	information about	them			
27.			s, and other geno permits, exclusive	eral intangibles licenses, cooperative association	n holdings, liquor licens	ses, professional licenses	
	☐ Yes.	Give specific	information about	them			
М	oney or p	property owe	d to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to		them, including whether you alrea	ady filed the returns ar	nd the tax years	
	□ No	les: Past due	or lump sum alim	ony, spousal support, child suppo	ort, maintenance, divor	ce settlement, property set	tlement
				Family Support			\$8,000.00
	Examp ■ No	les: Unpaid w	unpaid loans you	surance payments, disability bene made to someone else	efits, sick pay, vacation	n pay, workers' compensat	ion, Social Security
		ts in insuran					
	Examp ■ No	les: Health, di	sability, or life ins	urance; health savings account (h	HSA); credit, homeowr	ner's, or renter's insurance	
	☐ Yes. I	Name the insu	rance company o Company	of each policy and list its value. / name:	Beneficia	ry:	Surrender or refund value:
32.	If you a			you from someone who has die list, expect proceeds from a life ins		currently entitled to receive	property because
	_	Give specific	information				

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Schedule A/B: Property

Official Form 106A/B

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Deb	tor 1 tor 2	Tina Marie Wright Dorri Jamar Wright		Case number (if known)	
_		against third parties, whether or not you have filed a law les: Accidents, employment disputes, insurance claims, or ri		and for payment	
		Describe each claim			
34. (Other c	contingent and unliquidated claims of every nature, inclu	uding counterclaims	of the debtor and rights to	set off claims
	No				
	Yes.	Describe each claim			
	Any fin a] No	ancial assets you did not already list			
	Yes.	Give specific information			
		ADP Prepaid card			\$600.00
36.		he dollar value of all of your entries from Part 4, includin			\$9,120.00
Part	5: Des	scribe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ate in Part 1.	
37. D	o you o	own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go	to Part 6.			
	Yes. G	to to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. [Do you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. 0	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
		have other property of any kind you did not already list	?		
_	<i>⊑xamp</i> I No	oles: Season tickets, country club membership			
_	-	Give specific information			
54.	Add ti	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.		: Total real estate, line 2			\$0.00
56.		t: Total vehicles, line 5	\$45,247.00		
57.		: Total personal and household items, line 15	\$5,720.00		
58.		: Total financial assets, line 36	\$9,120.00		
59.		: Total business-related property, line 45	\$0.00		
60. 61.		: Total farm- and fishing-related property, line 52 : Total other property not listed, line 54 +	\$0.00 \$0.00		
				Convinersonal property	otal ¢co.007.00
62.	TOTAL	personal property. Add lines 56 through 61	\$60,087.00	Copy personal property t	otal \$60,087.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$60,087.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this information to identify your case:					
Debtor 1	Tina Marie Wright	:			
	First Name	Middle Name	Last Name		
Debtor 2	Dorri Jamar Wrigl	ht			
(Spouse if, filing)	First Name	Middle Name	Last Name		
	kruptcy Court for the:	WESTERN DISTRICT C	DF WASHINGTON		
Case number					
(if known)					☐ Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonban	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.						
	2015 Nissan Titan 30000 miles Line from Schedule A/B: 3.1	\$25,871.00		\$3,800.00	11 U.S.C. § 522(d)(2)					
	Line Ironi Scriedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit						
	2016 Nissan Altima 22000 miles Line from Schedule A/B: 3.2	\$19,376.00		\$3,750.00	11 U.S.C. § 522(d)(2)					
	Life from Scriedule PVB. 3.2			100% of fair market value, up to any applicable statutory limit						
	Used Household Goods and Furnishings	\$3,500.00		\$3,500.00	11 U.S.C. § 522(d)(3)					
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						
	Computers, game consoles, tablets, stereo equipent, cell phones, and	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)					
	other electronic equipment Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit						
	Clothing Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)					
	Line from Soffedule PVD. 11.1			100% of fair market value, up to any applicable statutory limit						

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debto Debto	-			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Jewelry ine from Schedule A/B: 12.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(4)
-	and from Goriedate AVE. 12.1			100% of fair market value, up to any applicable statutory limit	
	Family Pets ine from Schedule A/B: 13.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(3)
_	ane nom suredule A/D. 10.1			100% of fair market value, up to any applicable statutory limit	
_	Cash on hand ine from <i>Schedule A/B</i> : 16.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
L	Line Horti Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking and/or savings: Twinstar, Red River FCU, Wells Fargo	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
	ine from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Family Support ine from Schedule A/B: 29.1	\$8,000.00		\$0.00	11 U.S.C. § 522(d)(10)(D)
L	LINE HOTH Scriedule A/B. 23.1			100% of fair market value, up to any applicable statutory limit	
	ADP Prepaid card ine from Schedule A/B: 35.1	\$600.00		\$600.00	11 U.S.C. § 522(d)(5)
	ane nom schedule A/D. 33.1			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption Subject to adjustment on 4/01/22 and every No			led on or after the date of adjustme	nt.)
	Yes. Did you acquire the property coverNo	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	☐ Yes				

Official Form 106C

Fill in this inform	nation to identify yoເ	ır case:			
Debtor 1	Tina Marie Wrig	ht			
	First Name	Middle Name Last Name			
Debtor 2	Dorri Jamar Wri			_	
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT OF WASHINGTON		-	
Case number					
(if known)				☐ Check	if this is an
				ameno	ded filing
Official Forn	o 106D				
Schedule	D: Creditors	Who Have Claims Secured	l by Propert	У	12/15
	have claims secured by	y your property? In your other schedules. Yo	ou have nothing else	to report on this form.	
_	all of the information	,	3		
		Delow.			
	II Secured Claims		Column A	Column B	Column C
for each claim. If m	ore than one creditor has	more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
Gateway	One Lending &		£4 000 00	\$4,000,00	
Finance		Describe the property that secures the claim:	\$1,000.00	\$1,000.00	\$0.00
Creditor's Nam	e obison Road	Leased Furniture As of the date you file, the claim is: Check all that			
	a, TX 75501	apply. Contingent			
Number, Street, City, State & Zip Code Unliquidated					
		☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or secucar loan)	ured		
■ Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	he debtors and another	☐ Judgment lien from a lawsuit			
_	aim relates to a	Other (including a right to offset)			

Official Form 106D

community debt

Date debt was incurred _

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

page 1 of 2

Debtor 1 Tina Marie Wright	Case r	Case number (if known)			
First Name Middle N	lame Last Name				
Debtor 2 Dorri Jamar Wright First Name Middle N	lame Last Name				
i iist vaine ividule iv	Last Name				
2.2 State Farm Bank	Describe the property that secures the	e claim:	\$25,871.00	\$25,871.00	\$0.00
Creditor's Name	2015 Nissan Titan 30000 miles	s			
PO Box 87	As of the date you file, the claim is: Ch	neck all that			
Deposit, NY 13754	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mo	ortgage or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim relates to a community debt	Other (including a right to offset)	Auto Loan			
Date debt was incurred	Last 4 digits of account number	er			
			^ 440.0 = 0.00	^	40.00
2.3 State Farm Bank Creditor's Name	Describe the property that secures the		\$19,376.00	\$19,376.00	\$0.00
Creditor s Name	2016 Nissan Altima 22000 mil	es			
PO Box 87	As of the date you file, the claim is: Chapply.	neck all that			
Deposit, NY 13754	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mo	ortgage or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit	\(= 1 =			
Check if this claim relates to a community debt	Other (including a right to offset)	Auto Loan			
Date debt was incurred	Last 4 digits of account numbe	er			
			A (A A A B A B A B B B B B B B B B B	1	
Add the dollar value of your entries in C If this is the last page of your form, add	. •	er here:	\$46,247.00	-	
Write that number here:	the donar value totals from all pages.		\$46,247.00		
Part 2: List Others to Be Notified for	or a Debt That You Already Listed				

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

					_		
Fill	in this information to identify your cas	se:					
Deb	otor 1 Tina Marie Wright						
	First Name	Middle Name	Last Name				
	otor 2 Dorri Jamar Wright						
(Spo	use if, filing) First Name	Middle Name	Last Name				
Unit	ted States Bankruptcy Court for the:	WESTERN DISTRICT O	F WASHINGTON				
Cas (if kn	se number					neck if this is	
] ап	nended filing	g
	icial Form 106E/F						
Sc	hedule E/F: Creditors Wh	<u>o Have Unsecu</u>	red Claims			12	/15
left. / name Par	Attach the Continuation Page to this page. It is and case number (if known). List All of Your PRIORITY Unse	If you have no information					
	Do any creditors have priority unsecured c	laims against you?					
	☐ No. Go to Part 2.						
	Yes.						
	List all of your priority unsecured claims. If identify what type of claim it is. If a claim has be possible, list the claims in alphabetical order a Part 1. If more than one creditor holds a partic (For an explanation of each type of claim, see	ooth priority and nonpriority according to the creditor's na- cular claim, list the other cre	amounts, list that claim her ame. If you have more than ditors in Part 3.	e and show both priority two priority unsecured o	and nonpriority an	nounts. As m	nuch as
	7, ,			Total claim	Priority amount	Nonpr amoui	
2.1	Internal Revenue Service	Last 4 digits of	account number	\$0.00	\$0	0.00	\$0.00
	Priority Creditor's Name PO BOX 7346 Philadelphia, PA 19101	When was the o	lebt incurred?		_		
	Number Street City State Zip Code	As of the date y	ou file, the claim is: Chec	ck all that apply			
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORI	TY unsecured claim:				
	☐ At least one of the debtors and another	☐ Domestic sup	oport obligations				
	☐ Check if this claim is for a community	debt Taxes and ce	ertain other debts you owe t	the government			
	Is the claim subject to offset?		eath or personal injury while	•			
	■ No	Other. Specif					
	☐ Yes		Notice Only				
Dar	t 2: List All of Your NONPRIORITY	Insecured Claims					
	Do any creditors have nonpriority unsecure						
	☐ No. You have nothing to report in this part.	0 ,	ırt with your other schedule	es.			
	■ Yes.						
	List all of your nonpriority unsecured claim unsecured claim, list the creditor separately fo than one creditor holds a particular claim, list t Part 2.	r each claim. For each clair	m listed, identify what type of	of claim it is. Do not list c	laims already inclu	uded in Part 1	1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 17

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	1 Tina Marie Wright 2 Dorri Jamar Wright	Case number (if known)	
4.1	AEP Swepco	Last 4 digits of account number	\$1,250.00
	Nonpriority Creditor's Name 428 Travis St	When was the debt incurred?	·
	Shreveport, LA 71101	As of the date was file the plaint in O	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	_	
	,	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured Debt	
4.2	Alliance One	Last 4 digits of account number	\$4,252.00
	Nonpriority Creditor's Name PO BOX 11641	When was the debt incurred?	
	Tacoma, WA 98411 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Capital One Bank Collection	
4.3	AT&T Bankruptcy Dept	Last 4 digits of account number	\$315.00
	Nonpriority Creditor's Name P.O. Box 6463 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	☐ Debtor 1 only		
	Debtor 2 only	Contingent	
	■ Debtor 1 and Debtor 2 only	Unliquidated	
	_	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured Debt	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 17

	r 1 Tina Marie Wright r 2 Dorri Jamar Wright	Case number (if known)	
4.4	Capital One Bank	Last 4 digits of account number	\$4,251.00
	Nonpriority Creditor's Name PO Box 60024	When was the debt incurred?	
	City of Industry, CA 91716 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.5	Chexsystems	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Attn: Customer Relations 7805 Hudson Rd Ste 100	When was the debt incurred?	
	Saint Paul, MN 55125 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Notice Only	
4.6	Citibank	Last 4 digits of account number	\$1,275.00
	Nonpriority Creditor's Name P.O. Box 6077 Sioux Falls, SD 57117	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
		Student loans	
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ res	Other. Specify Unsecured Debt	

Schedule E/F: Creditors Who Have Unsecured Claims

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Dorri Jamar Wright	Case number (if known)	
Citibank	Last 4 digits of account number	\$1,275.00
Nonpriority Creditor's Name P.O. Box 6077	When was the debt incurred?	
Sioux Falls, SD 57117	When was the destiniculted:	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Unsecured Debt	
Comenity	Last 4 digits of account number	\$649.00
Nonpriority Creditor's Name		Ψ0-3.00
PO BOX 182273	When was the debt incurred?	
Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only		
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	Unliquidated	
_	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Unsecured Debt	
Comenity	Last 4 digits of account number	\$373.00
Nonpriority Creditor's Name		ψο. ο.σο
PO BOX 182273	When was the debt incurred?	
Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the damin is. Offect all that apply	
Debtor 1 only	-	
Debtor 2 only	Contingent	
_	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Unsecured Debt	

Schedule E/F: Creditors Who Have Unsecured Claims

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ebtor 2 Dorri Jamar Wright	Case number (if known)	
Comenity	Last 4 digits of account number	\$400.00
Nonpriority Creditor's Name PO BOX 182273	When was the debt incurred?	
Columbus, OH 43218		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Unsecured Debt	
Commonwealth Fin Sys	Last 4 digits of account number	\$320.0
Nonpriority Creditor's Name		Ψ02010
245 Main St Scranton, PA 18519	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
<u> </u>	Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Debt Collection	
Credits Inc	Last 4 digits of account number	\$131.0
Nonpriority Creditor's Name 461 E Main St	When was the debt incurred?	
Hermiston, OR 97838 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	2	
Debtor 1 only	□ October 1	
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
_	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not	
■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Debt Collection Interpath Lab	

Schedule E/F: Creditors Who Have Unsecured Claims

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Dorri Jamar Wright	Case number (if known)	
Directv	Last 4 digits of account number	\$314
Nonpriority Creditor's Name Attn Bankruptcy Claims PO Box 6550	When was the debt incurred?	
Englewood, CO 80155		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	Contingent	
☐ Debtor 2 only	□ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Unsecured Debt	
Dynamic Collectors Inc	Last 4 digits of account number	\$365
Nonpriority Creditor's Name		****
790 S Market Blvd Chehalis, WA 98532	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Collection	
Equifax	Lact 4 digits of account number	\$0
Nonpriority Creditor's Name	Last 4 digits of account number	ΨΟ
PO BOX 30272 Tampa, FL 33630	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Notice Only	

Schedule E/F: Creditors Who Have Unsecured Claims

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Experian	Last 4 digits of account number	\$0.
Nonpriority Creditor's Name Profile Maintenance	When was the debt incurred?	
PO BOX 9558		
Allen, TX 75013 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Greek all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Notice Only	
	— Officer: Specify	
Freedom Acceptance	Last 4 digits of account number	\$452.
Nonpriority Creditor's Name 1150 E Little Creek	When was the debt incurred?	
Norfolk, VA 23518 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Unsecured Debt	
Healthy Future Pediatrics	Last 4 digits of account number	\$30
Nonpriority Creditor's Name 3023 Pacific Ave SE	When was the debt incurred?	Ψσσ.
Olympia, WA 98501		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Services Rendered	

Schedule E/F: Creditors Who Have Unsecured Claims

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IC System	Last 4 digits of account number	\$314.00
Nonpriority Creditor's Name 444 Hwy 96 E	When was the debt incurred?	
PO Box 64887		
Saint Paul, MN 55164		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection	
10.0		\$400.0
IC System Nonpriority Creditor's Name	Last 4 digits of account number	\$190.00
444 Hwy 96 E	When was the debt incurred?	
PO Box 64887		
Saint Paul, MN 55164		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<u> </u>		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Ariosa Diagnostices Inc Collection	
Laborn		\$192.00
Labcorp Nonpriority Creditor's Name	Last 4 digits of account number	φ192.00
550 17th Ave Ste 300 Seattle, WA 98122	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	Continuent	
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
■ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical or Dental Expenses	

Schedule E/F: Creditors Who Have Unsecured Claims

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Dorri Jamar Wright	Case number (if known)	
LVNV Funding	Last 4 digits of account number	\$507.00
Nonpriority Creditor's Name PO Box 10497	When was the debt incurred?	<u> </u>
Greenville, SC 29603 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, and the same year me, and ordinated or control and the same same same same same same same sam	
☐ Debtor 1 only	□ Outinest	
☐ Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
■ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Revolving Charge Account	
MCM	Last 4 digits of account number	\$389.00
Nonpriority Creditor's Name PO BOX 603 Oaks, PA 19456	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Debt Collection	
Melissa Kohler ND, LAC Nonpriority Creditor's Name	Last 4 digits of account number	\$243.00
3624 Ensign Rd NE Suite B Olympia, WA 98506	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	□ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical or Dental Expenses	

Schedule E/F: Creditors Who Have Unsecured Claims

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Dorri Jamar Wright	Case number (if known)	
Midland Funding	Last 4 digits of account number	\$757.00
Nonpriority Creditor's Name 8875 Aero Dr Ste 200	When was the debt incurred?	
San Diego, CA 92123 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Unsecured Debt	
Midland Funding	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name 8875 Aero Dr Ste 200	When was the debt incurred?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
San Diego, CA 92123 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only		
Debtor 2 only	Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Student loans	
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Unsecured Debt	
Nolnet		¢4 820 00
NeInet Nonpriority Creditor's Name	Last 4 digits of account number	\$4,830.00
P.O. Box 2970 Omaha, NE 68103	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Student Loan	

Schedule E/F: Creditors Who Have Unsecured Claims

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Nelnet	Last 4 digits of account number	\$7,266.00
Nonpriority Creditor's Name P.O. Box 2970	When was the debt incurred?	
Omaha, NE 68103		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Student Loan	
Olympia Womens Health	Last 4 digits of account number	\$120.0
Nonpriority Creditor's Name 403 Black Hill s Ln SW	When was the debt incurred?	· · ·
Olympia, WA 98502	As of the date year file the claim in Check all that apply	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	_	
Debtor 2 only	Contingent	
_	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Services Rendered	
PORTFOLIO RECOVERY	Last 4 digits of account number	\$650.0
Nonpriority Creditor's Name PO BOX 281532	When was the debt incurred?	
ATLANTA, GA 30384 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	·	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ Other Specify Unsecured Debt	

Schedule E/F: Creditors Who Have Unsecured Claims

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Providence Health	Last 4 digits of account number	\$13,908.00
Nonpriority Creditor's Name PO BOX 34726 Seattle, WA 98124	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Medical or Dental Expenses	
Providence Health	Last 4 digits of account number	\$1,641.00
Nonpriority Creditor's Name PO BOX 34726	When was the debt incurred?	ψ1,011100
Seattle, WA 98124		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset? —	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical or Dental Expenses	
Providence Health	Last 4 digits of account number	\$1,929.00
Nonpriority Creditor's Name PO BOX 34726	When was the debt incurred?	
Seattle, WA 98124 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Medical or Dental Expenses	

Schedule E/F: Creditors Who Have Unsecured Claims

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Dorri Jamar Wright	Case number (if known)	
Providence Health	Last 4 digits of account number	\$443.0
Nonpriority Creditor's Name PO BOX 34726	When was the debt incurred?	<u> </u>
Seattle, WA 98124 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	-	
Debtor 2 only	Contingent	
■ Debtor 1 and Debtor 2 only	Unliquidated	
	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
— No □ Yes	■ Other. Specify Medical or Dental Expenses	
in tes	Other. Specify Medical of Defital Expenses	
Providence Health	Last 4 digits of account number	\$897.0
Nonpriority Creditor's Name		
PO BOX 34726	When was the debt incurred?	
Seattle, WA 98124 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
Debtor 1 only	-	
Debtor 2 only	Contingent	
_	Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical or Dental Expenses	
Danidan - Haski		\$000.0
Providence Health Nonpriority Creditor's Name	Last 4 digits of account number	\$269.0
PO BOX 34726 Seattle, WA 98124	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	□ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical or Dental Expenses	

Schedule E/F: Creditors Who Have Unsecured Claims

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Providence Health & Services	Last 4 digits of account number	\$30.00
Nonpriority Creditor's Name PO BOX 3177	When was the debt incurred?	
Portland, OR 97208 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
Debtor 2 only	☐ Contingent ☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical or Dental Expenses	
Dad Birrar FCU		£2,000,00
Red River FCU Nonpriority Creditor's Name	Last 4 digits of account number	\$3,000.00
PO BOX 5909 Texarkana, TX 75505	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Unsecured Debt	
Seattle Childrens Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$150.00
PO Box 24049 Seattle, WA 98124	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical or Dental Expenses	

Schedule E/F: Creditors Who Have Unsecured Claims

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Dorri Jamar Wright	Case number (if known)	
Social Security Administration	Last 4 digits of account number	\$10,000.0
Nonpriority Creditor's Name 402 Yauger Way SW Olympia, WA 98502	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only		
■ Debtor 1 and Debtor 2 only	Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Student loans	
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Overpayment	
Synchrony Bank	Last 4 digits of account number	\$618.0
Nonpriority Creditor's Name P.O. Box 965037	When was the debt incurred?	ψ010.
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Unsecured Debt	
Transunion	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name 555 West Adams St	When was the debt incurred?	
Chicago, IL 60611 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date year me, the claim to concert and the cappy	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Notice Only	

Schedule E/F: Creditors Who Have Unsecured Claims

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	mar Wright	Case number (if known)					
Walmart Nonpriority Creditor's Name C/O GE Money Bank Attn: Bankruptcy Dept PO Box 103104 Roswell, GA 30076 Number Street City State Zip Code Who incurred the debt? Check one.		Last 4 digits of account n	umber			\$897.00	
		When was the debt incurred?					
		As of the date you file, the claim is: Check all that apply					
Debtor 1 o	only	☐ Contingent					
Debtor 2 of	only	☐ Unliquidated					
■ Debtor 1 a	and Debtor 2 only						
	,	•	☐ Disputed Type of NONPRIORITY unsecured claim:				
☐ At least one of the debtors and another		<u></u> '	secureu ciaiii.				
Check if this claim is for a community debt Is the claim subject to offset?		 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims 					
No		Debts to pension or prof	it-sharing plans, a	nd other similar	debts		
☐ Yes		Other. Specify Revo	Iving Charge	Account			
Part 3: List Othe	ers to Be Notified About a D	ebt That You Already Listed					
notified for any debts in Parts 1 or 2, do not fill out Name and Address Gordon Aylworth & Tami, PC Attorneys at Law 4023 West 1st Ave P.O. Box 22338 Eugene, OR 97402		On which entry in Part 1 or Part 2 Line 4.26 of (<i>Check one</i>):	· —	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
4023 West 1st A P.O. Box 22338	ve		Part 2: C	reditors with No	npriority Unsecured Claims		
4023 West 1st A P.O. Box 22338 Eugene, OR 974	ve	Last 4 digits of account number			npriority Unsecured Claims		
4023 West 1st A P.O. Box 22338 Eugene, OR 9740 Name and Address	ve	On which entry in Part 1 or Part 2	did you list the ori	ginal creditor?			
4023 West 1st A P.O. Box 22338 Eugene, OR 9740 Name and Address Paclab	ve	· · · · · · · · · · · · · · · · · · ·	did you list the ori □ Part 1: C	ginal creditor? reditors with Pri	ority Unsecured Claims		
4023 West 1st Average P.O. Box 22338 Eugene, OR 9740 Name and Address Paclab PO Box 2670	ve 02	On which entry in Part 1 or Part 2	did you list the ori □ Part 1: C	ginal creditor? reditors with Pri			
4023 West 1st Average P.O. Box 22338 Eugene, OR 9740 Name and Address Paclab PO Box 2670	ve 02	On which entry in Part 1 or Part 2	did you list the ori □ Part 1: C	ginal creditor? reditors with Pri	ority Unsecured Claims		
A023 West 1st A P.O. Box 22338 Eugene, OR 9740 Name and Address Paclab PO Box 2670 Spokane, WA 99	220 ery Assciates	On which entry in Part 1 or Part 2 Line 4.14 of (Check one):	did you list the ori □ Part 1: C ■ Part 2: C did you list the ori □ Part 1: C	ginal creditor? reditors with Pri- reditors with No ginal creditor? reditors with Pri-	ority Unsecured Claims Inpriority Unsecured Claims Ority Unsecured Claims		
A023 West 1st A P.O. Box 22338 Eugene, OR 9740 Name and Address Paclab PO Box 2670 Spokane, WA 99 Name and Address Portfolio Recove 120 Corporate B	220 ery Assciates	On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.7 of (Check one):	did you list the ori □ Part 1: C ■ Part 2: C did you list the ori □ Part 1: C	ginal creditor? reditors with Pri- reditors with No ginal creditor? reditors with Pri-	ority Unsecured Claims Inpriority Unsecured Claims		
4023 West 1st Average P.O. Box 22338 Eugene, OR 9746 Name and Address Paclab PO Box 2670 Spokane, WA 99 Name and Address Portfolio Recover 120 Corporate B Norfolk, VA 2350	220 ery Assciates	On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number	did you list the ori Part 1: C Part 2: C did you list the ori Part 1: C Part 2: C	ginal creditor? reditors with Pri- reditors with No ginal creditor? reditors with Pri- reditors with No	ority Unsecured Claims Inpriority Unsecured Claims Ority Unsecured Claims		
A023 West 1st Average P.O. Box 22338 Eugene, OR 9746 Name and Address Paclab PO Box 2670 Spokane, WA 99 Name and Address Portfolio Recover 120 Corporate B Norfolk, VA 2350 Name and Address South Sound Ra 3417 Ensign NE	220 ery Assciates lvd. 122	On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.7 of (Check one):	did you list the ori Part 1: C Part 2: C did you list the ori Part 2: C did you list the ori Part 1: C	ginal creditor? reditors with Pri- reditors with No ginal creditor? reditors with No reditors with Pri- reditors with Pri- reditors with Pri-	ority Unsecured Claims Inpriority Unsecured Claims Ority Unsecured Claims		
4023 West 1st A P.O. Box 22338	220 ery Assciates lvd. 122	On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2	did you list the ori Part 1: C Part 2: C did you list the ori Part 2: C did you list the ori Part 1: C	ginal creditor? reditors with Pri- reditors with No ginal creditor? reditors with No reditors with Pri- reditors with Pri- reditors with Pri-	ority Unsecured Claims Inpriority Unsecured Claims		
4023 West 1st Average P.O. Box 22338 Eugene, OR 9746 Name and Address Paclab PO Box 2670 Spokane, WA 99 Name and Address Portfolio Recover 120 Corporate B Norfolk, VA 2350 Name and Address South Sound Ra 3417 Ensign NE Olympia, WA 985	ve 02 220 ery Assciates lvd. 02 dioligists	On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number	did you list the ori Part 1: C Part 2: C did you list the ori Part 2: C did you list the ori Part 1: C	ginal creditor? reditors with Pri- reditors with No ginal creditor? reditors with No reditors with Pri- reditors with Pri- reditors with Pri-	ority Unsecured Claims Inpriority Unsecured Claims		
A023 West 1st Average Process Process Paclab Po Box 2670 Spokane, WA 99 Name and Address Portfolio Recover 120 Corporate Born Norfolk, VA 2350 Name and Address South Sound Rame Address South Sound Rame Address South Sound Rame Address South Sound Rame Address Address Add the Part 4: Add the	ve 02 220 2ry Assciates lvd. 02 dioligists 506 Amounts for Each Type of U	On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number	did you list the ori Part 1: C Part 2: C did you list the ori Part 1: C Part 2: C did you list the ori Part 2: C	ginal creditor? reditors with Pri- reditors with No ginal creditor? reditors with No ginal creditor? reditors with Pri- reditors with Pri- reditors with No	ority Unsecured Claims Inpriority Unsecured Claims	nts for each	
A023 West 1st Average Process Process Paclab Po Box 2670 Spokane, WA 99 Name and Address Portfolio Recover 120 Corporate Born Norfolk, VA 2350 Name and Address South Sound Rame Address South Sound Rame Address South Sound Rame Address Address Address Address Add the Address	ve 02 220 2ry Assciates lvd. 02 dioligists 506 Amounts for Each Type of U	On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number	did you list the ori Part 1: C Part 2: C did you list the ori Part 1: C Part 2: C did you list the ori Part 2: C	ginal creditor? reditors with Priceditors with No ginal creditor? reditors with No ginal creditor? reditors with No ginal creditor? reditors with Priceditors with No	ority Unsecured Claims Inpriority Unsecured Claims	nts for each	
A023 West 1st Average Process Paclab Po Box 2670 Spokane, WA 99 Name and Address Portfolio Recover 120 Corporate Born Norfolk, VA 2350 Name and Address Portfolio Recover 120 Corporate Born Norfolk, VA 2350 Name and Address South Sound Rass Address South Sound Rass Address Addre	ve 02 220 220 2ry Assciates lvd. 02 dioligists 506 Amounts for Each Type of United the Control of Certain types of unsecured claim.	On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number Unsecured Claim aims. This information is for stati	did you list the ori Part 1: C Part 2: C did you list the ori Part 1: C Part 2: C did you list the ori Part 2: C	ginal creditor? reditors with Priceditors with No ginal creditor? reditors with No ginal creditor? reditors with No ginal creditor? reditors with Priceditors with No	ority Unsecured Claims npriority Unsecured Claims ority Unsecured Claims npriority Unsecured Claims ority Unsecured Claims npriority Unsecured Claims npriority Unsecured Claims	nts for each	
A023 West 1st And P.O. Box 22338 Eugene, OR 9746 Name and Address Paclab PO Box 2670 Spokane, WA 99 Name and Address Portfolio Recover 120 Corporate B Norfolk, VA 2350 Name and Address South Sound Ra 3417 Ensign NE Olympia, WA 985 Part 4: Add the Total the amounts of type of unsecured of the second Ra Add the Ramounts of type of unsecured of the second Ramounts of type of unsecured of the Ramounts of type of unsecured of the Ramounts of the Ramounts of type of unsecured of the Ramounts of	ve 02 220 220 2ry Assciates lvd. 02 dioligists 506 Amounts for Each Type of Understand types of unsecured claim. a. Domestic support obligation	On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.14 of (Check one): Last 4 digits of account number Just 4 digits of account number	did you list the ori Part 1: C Part 2: C did you list the ori Part 1: C Part 2: C did you list the ori Part 2: C	ginal creditor? reditors with Pri reditors with No ginal creditor? reditors with No ginal creditor? reditors with No ginal creditor? reditors with Pri reditors with No	ority Unsecured Claims Inpriority Unsecured Claims Ority Unsecured Claims Inpriority Unsecured Claims Ority Unsecured Claims Inpriority Unsecu	nts for each	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Tina Marie Wright Debtor 2 **Dorri Jamar Wright** Case number (if known) 6e. Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** Student loans 6f. 0.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 6i. 65,892.00

6j.

65,892.00

Total Nonpriority. Add lines 6f through 6i.

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Fill in this infor	mation to identify your	case:							
Debtor 1	Tina Marie Wrigh	Tina Marie Wright							
	First Name	Middle Name	Last Name						
Debtor 2	Dorri Jamar Wright								
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	DF WASHINGTON						
Case number									
(if known)					Check if this is an				
					amended filing				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Gateway One Lending & Finance 160 N Riverview Dr #100 Anaheim, CA 92808 **Furniture lease**

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this info	rmation to identify your	case:			
Debtor 1	Tina Marie Wrigh	Middle Name	Last Name		
Debtor 2	Dorri Jamar Wrig		Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	WESTERN DISTRICT OF V	WASHINGTON		
Case number					
(if known)					Check if this is an amended filing
Official Fo	orm 106H				
Schedule	H: Your Cod	ebtors			12/15
1. Do you let No Yes 2. Within the Arizona, Ca	have any codebtors? (If the last 8 years, have yo alifornia, Idaho, Louisiana o line 3.	J. Answer every question. you are filing a joint case, do result of the case, and the case, and the case, and the case, and the case, are case, and the case, and the case, are case, are case, are case, are case, are case, and the case, are case, are case, and the case, are case, are case, and the case, are case, are case, are case, are case, are case, and the case, are case, and the case, are case, and the case, are case, are case, are case, are case, are case, are case, and the case, are	erty state or territor Rico, Texas, Wash	y? (Community property	r states and territories include
□ N ■ Y	-				
		e or territory did you live?	-NONE-	. Fill in the name an	d current address of that person.
	Name of your spouse, former sp	ouse, or legal equivalent			
in line 2 ag Form 106D out Colum	gain as a codebtor only)), Schedule E/F (Officia	tors. Do not include your spo if that person is a guarantor I Form 106E/F), or Schedule	or cosigner. Make	sure you have listed th 16G). Use Schedule D, S	y with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3.1 Name				_ ☐ Schedule D, line ☐ Schedule E/F, li	
				☐ Schedule G, line	
Numbe City	er Street	State	ZIP Code	_	
3.2				☐ Schedule D, line	
Name				□ Schedule E/F, li □ Schedule G, line	ne
Numbe	er Street	State	ZIP Code		
City		Jiaie	ZIF COUE		

Official Form 106H Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com Schedule H: Your Codebtors

Page 1 of 1 Best Case Bankruptcy

Fill in this information	to identify your case:	
Debtor 1	Tina Marie Wright	
Debtor 2 (Spouse, if filing)	Dorri Jamar Wright	
United States Bankrup	otcy Court for the: WESTERN DISTRICT OF WASHINGTON	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date:
Official Form		MM / DD/ YYYY
	Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Cook **Concierge Agent** Include part-time, seasonal, or **Heartland Employment** self-employed work. **Twinstar Credit Union Employer's name** Services Occupation may include student or homemaker, if it applies. **Employer's address** 433 N Summit St. **PO Box 718 Toledo, OH 43604** Olympia, WA 98507 How long employed there? 3 years 2 years **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing

spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 7,062.73 2,703.74 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 3. 0.00 +\$ Calculate gross Income. Add line 2 + line 3. 7,062.73 2,703.74

Official Form 106l Schedule I: Your Income page 1

Case number (if known)

					ı	For Debtor 1			Debtor 2 or n-filing spouse)
	Copy	y line 4 here		4.	;	\$7,062	2.73	\$_	2,703.7	4_
5.	List	all payroll deduct	tions:							
	5a. 5b.		and Social Security deductions tributions for retirement plans	5a. 5b.		\$ 935 \$ 0	5.46 0.00	\$_ \$	277.3 0.0	
	5c.	Voluntary contr	ributions for retirement plans	5c.	;	\$ 0	.00	\$	0.0	0
	5d.	Required repay	ments of retirement fund loans	5d.	. ;	\$ 0	.00	\$	0.0	0
	5e.	Insurance		5e.	. ;	\$ 536	.71	\$	9.8	0
	5f.	Domestic supp	ort obligations	5f.			.00	\$_	0.0	
	5g.	Union dues		5g.	. ;	\$0	.00	\$_	0.0	
	5h.	Other deduction	ns. Specify:	5h.	+ :	\$ O	.00	+ \$_	0.0	0_
6.			ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9			\$_	287.1	
7.	Calc	ulate total month	lly take-home pay. Subtract line 6 from line 4.	7.	9	5,590	.56	\$_	2,416.6	4_
8.	List a 8a.	Net income from profession, or f Attach a statemen	ent for each property and business showing gross y and necessary business expenses, and the total	8a.	. ;	\$ 0	0.00	\$	0.0	0
	8b.	Interest and div		8b.	. ;		.00	\$	0.0	
	8c.	regularly receiv Include alimony,	payments that you, a non-filing spouse, or a depending spousal support, child support, maintenance, divorce property settlement.	ent 8c.	;	\$ 0	0.00	\$	0.0	0
	8d.	Unemployment	compensation	8d.	. ;	\$ 0	.00	\$	0.0	0
	8e.	Social Security		8e.	. ;	\$ 0	.00	\$	0.0	0
	8f.	Include cash ass that you receive,	ent assistance that you regularly receive sistance and the value (if known) of any non-cash assista such as food stamps (benefits under the Supplemental nce Program) or housing subsidies.	ance 8f.	;	\$ 0	0.00	\$	0.0	0
	8g.	Pension or retir	rement income	8g.	. ;	\$ 0	.00	\$	0.0	0
	8h.	Other monthly i	income. Specify:	8h.	+ :	\$ 0	.00	+ \$_	0.0	0
9.	Add	all other income.	. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0	0.00	\$_	0.	00
10.	Calc	ulate monthly inc	come. Add line 7 + line 9.	10.	5	5,590.56	+ \$	2.	416.64 = \$	8,007.20
		-	10 for Debtor 1 and Debtor 2 or non-filing spouse.		_	0,000.00	-			5,561.126
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00									
12.		that amount on the	e last column of line 10 to the amount in line 11. The ne Summary of Schedules and Statistical Summary of Co.				. ,		12. \$	8,007.20
13.	Do y	ou expect an inc	rease or decrease within the year after you file this fo	orm?					Comb mont	oined hly income
		Yes. Explain:								
		100. Explain.								

Official Form 106l Schedule I: Your Income page 2

Fill in this	information to identify y	our case:					
Debtor 1	Tina Marie V	Wright				ck if this is:	
Debtor 2 (Spouse, if	Dorri Jamar	r Wright				An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
United State	es Bankruptcy Court for the	e: WESTERN DISTRIC	T OF WASHI	NGTON		MM / DD / YYYY	
Case numb (If known)	er						
Officia	al Form 106J						
	dule J: Your	Evnoncos					12/1
Be as cor information number (i	mplete and accurate as on. If more space is no if known). Answer eve	s possible. If two marri eeded, attach another s ery question.					r supplying correct
Part 1:	Describe Your House is a joint case?	ehold					
	o. Go to line 2.						
_		in a separate househo	ld2				
		in a separate nouseno	iu:				
	■ No □ Yes. Debtor 2 mu	ust file Official Form 106J	-2, Expenses	for Separate House	<i>hold</i> of Deb	otor 2.	
2. Do v	ou have dependents?	No					
-	ot list Debtor 1 and	Yes. Fill out this in each depend		Dependent's relation		Dependent's age	Does dependent live with you?
Do n	ot state the						□ No
depe	ndents names.			Daughter		_ 1	■ Yes □ No
				Daughter		14	Yes
				Son		18	□ No ■ Yes
							□No
2 Do v	our expenses include	_		Daughter		21	Yes
expe	our expenses include enses of people other t self and your depende	than					
	your expenses as of y as of a date after the	oing Monthly Expenses your bankruptcy filing o bankruptcy is filed. If t					pter 13 case to report f the form and fill in the
the value		non-cash government nd have included it on s				Your expe	enses
	,						
	rental or home owners nents and any rent for th	ship expenses for your he ground or lot.	residence. In	clude first mortgage	4. 9	\$	1,600.00
If no	t included in line 4:						
4a.	Real estate taxes				4a. 3	\$	0.00
4b.		's, or renter's insurance			4b.	·	16.50
4c.	•	epair, and upkeep exper			4c.	·	50.00
4d.		ation or condominium due			4d.	·	0.00
Addi	tional mortgage paym	nents for your residence	e, such as hon	ne equity loans	5.		0.00

Official Form 106J Schedule J: Your Expenses page 1

Tina Marie Wright Debtor 1 Debtor 2 Dorri Jamar Wright Case number (if known) **Utilities:** Electricity, heat, natural gas 6a. \$ 6a. 300.00 6b. Water, sewer, garbage collection 6b. \$ 231.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 500.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 1,500.00 Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning 9. \$ 310.00 Personal care products and services 10. \$ 150.00 Medical and dental expenses 11 11. \$ 300.00 12. Transportation. Include gas, maintenance, bus or train fare. 600.00 12. \$ Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 200.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 0.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 200.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: IRS 16. \$ 100.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 631.67 17b. Car payments for Vehicle 2 17b. \$ 471.73 17c. Other. Specify: Student Loans17d. Other. Specify: Furniture 17c. \$ 150.00 17d. \$ 150.00 Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 20b. Real estate taxes 0.00 20c. \$ 20c. Property, homeowner's, or renter's insurance 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. \$ 20e. Homeowner's association or condominium dues 0.00 21. +\$ 21. Other: Specify: Pet food, supplies and medical expenses 50.00 Uniforms/work boots, gloves etc. 125.00 Infant/toddler supplies +\$ 200.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. \$ 7,835.90 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 7,835.90 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 8,007.20 23b. Copy your monthly expenses from line 22c above. 23h -\$ 7,835.90 Subtract your monthly expenses from your monthly income. 171.30 The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ☐ No. Explain here: Debtor has hypothyrodism and daughter is prediabetic. Debtor drinks alkaline water. Debtors Yes. are on a physician recommended keto diet and daughter eats gluten free so food expenses are high.

Official Form 106J Schedule J: Your Expenses page 2

Fill in this inform	mation to identify your	case:		
Debtor 1	Tina Marie Wrigh	t		
	First Name	Middle Name	Last Name	_
Debtor 2	Dorri Jamar Wrig		Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF WASHINGTON	_
Case number				
(if known)				☐ Check if this is an amended filing
You must file thi obtaining money years, or both. 1	s form whenever you f	ile bankruptcy schedules n connection with a bank	nsible for supplying correct information or amended schedules. Making a falstruptcy case can result in fines up to	
Did you pa	y or agree to pay some	eone who is NOT an attor	ney to help you fill out bankruptcy for	ms?
■ No				
☐ Yes. N	Name of person			ch Bankruptcy Petition Preparer's Notice, laration, and Signature (Official Form 119)
	ilty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed with this de	claration and
X /s/ Tina	a Marie Wright		X /s/ Dorri Jamar Wright	
Tina M	larie Wright		Dorri Jamar Wright	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date _	June 10, 2019		Date June 10, 2019	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fil	l in this inforn	nation to identify you	r case:			
De	btor 1	Tina Marie Wrigh		LastMana		
Dο	btor 2	First Name Dorri Jamar Wri	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	WESTERN DISTRICT OF	WASHINGTON		
	use number				-	heck if this is an mended filing
Ot	fficial Fo	rm 107				g
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
info nur	ormation. If m	ore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
1.	-	r current marital statu	rital Status and Where You	Lived Belore		
	☐ Married	our one maritar otate				
	■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
	□ No					
	Yes. Ma	ake sure you fill out Scl	nedule H: Your Codebtors (Of	fficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	l in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$12,873.57	■ Wages, commissions, bonuses, tips	\$35,804.52
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Best Case Bankruptcy

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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

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■ Other Landlord

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Official Form 107

Best Case Bankruptcy

page 3

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Tina Marie Wright Dorri Jamar Wright	Case number	(if known)	
 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was 				
	Creditor Name and Address	Describe the action the creditor took	taken	Amount
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a	cy, was any of your property in the possession of an a nother official?	assignee for the bene	fit of creditors, a
	□ Yes			
Par	List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts with a total value of more th	nan \$600 per person?	•
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con	tcy, did you give any gifts or contributions with a tota	l value of more than S	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptor gambling?	cy or since you filed for bankruptcy, did you lose anyt	hing because of theft	t, fire, other disaster,
	No No			
	how the loss occurred	escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
	Within 1 year before you filed for bankrupto consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay or comparing a bankruptcy petition? coarers, or credit counseling agencies for services required		ty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Brown and Seelye 744 S Fawcett Ave Tacoma, WA 98402 stopdebt@gmail.com	\$750.00 attorney fees	2019	\$750.00

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
	Credit Counseling	Mandatory cre	dit counseling		2019	Unknown
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	rs or to make payment			or transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrupte transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have alread Include yes. Fill in the details.	usiness or financial aff ade as security (such as	fairs? the granting of a s		•	
	Person Who Received Transfer Address Person's relationship to you	Description and property transfer			any property or s received or debts schange	Date transfer was made
	Dawn Chambers Rt 1 Box 753A Queen City, TX None	Vacant Land tr Buyer paid bac no funds to cli (foreclosure w unpaid taxes)	ck taxes and ent	None		11/17
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 					of which you are a	
	Name of trust	Description and	Description and value of the property transfer			Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Depos	it Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associ ■ No ■ Yes. Fill in the details.	r other financial accou	ınts; certificates o	of deposit; sl	•	, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	clo me	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables? No	ear before you filed fo	or bankruptcy, any	/ safe deposi	it box or other depos	sitory for securities,
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Official Form 107

Debtor 1	Tina Marie Wright
Debtor 2	Dorri Jamar Wright

Case number (if known)

22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy?	?
	■ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it?	Describe the contents	Do you still have it?
		Address (Number, Street, City, State and ZIP Code)		
Par	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust
	NoYes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Inform	nation		
For	the purpose of Part 10, the following definitions	s apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, ground	• • • • • • • • • • • • • • • • • • • •	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	_	law, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environ		s waste, hazardous substance, toxic s	ubstance,
	hazardous material, pollutant, contaminant, or	similar term.		
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	n they occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	ironmental law? Include settlements a	and orders.
	NoYes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	Give Details About Your Business or Con	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	y (LLC) or limited liability partnersh	ip (LLP)	
Offici	al Form 107 Statement	of Financial Affairs for Individuals Filing	g for Bankruptcy	page 6
Softwa	are Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com			Best Case Bankruptcy

Case 19-41914-BDL Doc 1 Filed 06/10/19 Ent. 06/10/19 16:36:46 Pg. 48 of 62

	otor 1 Tina Marie Wright otor 2 Dorri Jamar Wright		Case number (if known)				
	■ No. None of the above applies. Go to	ng or equity securities of a corporation					
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed				
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties. No Yes. Fill in the details below.	tcy, did you give a financial statement to	anyone about your business? Include all financial				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					
Par	t 12: Sign Below						
are with 18 U	I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. 18 Ina Marie Wright St. Dorri Jamar Wright Dorri Jamar Wright						
	nature of Debtor 1	Signature of Debtor 2					
Dat	ge	Date June 10, 2019					
Did ■ N		ent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?				
	you pay or agree to pay someone who is not lo 'es. Name of Person Attach the Bankro						

Fill in this infor	mation to identify your case:		
Debtor 1	Tina Marie Wright		
	First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Dorri Jamar Wright First Name Middle Name	Last Name	
United States Ba	ankruptcy Court for the: WESTERN DIST	TRICT OF WASHINGTON	
Case number			_ 0
(if known)			Check if this is an amended filing
If you are an ind ■ creditors hav ■ you have lease You must file th	nt of Intention for Individual filing under chapter 7, you must for claims secured by your property, or sed personal property and the lease has its form with the court within 30 days afte ever is earlier, unless the court extends the		or the meeting of creditors,
	eople are filing together in a joint case, b nd date the form.	oth are equally responsible for supplying correct info	rmation. Both debtors must
	and accurate as possible. If more space our name and case number (if known).	is needed, attach a separate sheet to this form. On the	e top of any additional pages,
Part 1: List Y	our Creditors Who Have Secured Claims		
1. For any credit information b		D: Creditors Who Have Claims Secured by Property (C	official Form 106D), fill in the
Identify the cr	reditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
		Secures a dest:	as exempt on ocheane of
0 111 1		_	_
Creditor's (Sateway One Lending & Finance	☐ Surrender the property.	□ No
name.		Retain the property and redeem it.Retain the property and enter into a	■ Yes
Description of	Leased Furniture	Reaffirmation Agreement.	
property		☐ Retain the property and [explain]:	
securing debt	•		
-			-
Creditor's	State Farm Bank	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	=
Description of	2015 Nissan Titan 30000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property		Retain the property and [explain]:	
securing debt	:		
Creditor's	State Farm Bank	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	— · · · ·
Description of	2016 Nicean Altima 22000 miles	Retain the property and enter into a	Yes
	2016 Nissan Altima 22000 miles	Reaffirmation Agreement.	
property		☐ Retain the property and [explain]:	
Official Form 108	Statement of I	ntention for Individuals Filing Under Chapter 7	2000
Onicial Fulli 100	Statement of i	member for individuals Filling Unider Chapter 1	page 1

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Best Case Bankruptcy

Debtor 1 Debtor 2	Tina Marie Wright Dorri Jamar Wright	Case number (if known)
securir	ng debt:	
Part 2:	List Your Unexpired Personal Property Le	ases
For any u in the info	nexpired personal property lease that you ormation below. Do not list real estate lease	isted in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill s. Unexpired leases are leases that are still in effect; the lease period has not yet ended. se if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe	your unexpired personal property leases	Will the lease be assumed?
Lessor's ı	name: Gateway One Lending & F	inance
		■ Yes
Description Property:	on of leased Furniture lease	
Part 3:	Sign Below	
	nalty of perjury, I declare that I have indicat hat is subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
X /s/ 1	ina Marie Wright	χ /s/ Dorri Jamar Wright
Tina	a Marie Wright	Dorri Jamar Wright
Sign	ature of Debtor 1	Signature of Debtor 2
Date	June 10, 2019	Date June 10, 2019

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Best Case Bankruptcy

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	<u>\$15</u>	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations.

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

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United States Bankruptcy Court Western District of Washington

In re	Tina Marie Wright Dorri Jamar Wright		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENS	SATION OF ATTOR	RNEY FOR DE	BTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ 750.00
Prior to the filing of this statement I have received	\$ 750.00
Balance Due	\$ 0.00

- 2. The source of the compensation paid to me was:
 - Debtor □ Other (specify):
- 3. The source of compensation to be paid to me is:
 - Debtor □ Other (specify):
- 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 - ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
- 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required:
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. [Other provisions as needed]

CHAPTER 7

In all Chapter 7 cases the attorney fees and costs are set at a flat fee of &750.00 but exclude the items listed below which shall be billed separately at the attorney's current billing rates of \$375.00 per hour. Chapter 7 fees include a free consulation and the following: (a) Case review; (b) Exemption planning; (c) Preparation and filing of the Bankruptcy Schedules and providing 4002 documents to Trustee; and (d) Attendance at the Meeting of Creditors and (e) Reaffirmation Agreements only if provided by the lender

CHAPTER 13

I/we agree to pay \$750.00 prior to filing which includes \$650.00 for attorney fees and \$100.00 for credit report(s) to be imported into the Chapter 13 Schedules.

In all Chapter 13 cases the attorney fees and costs shall be actual time and costs expended with the current attorney rate of \$375.00 per hour and paralegal rate of \$150.00 per hour with rates subject to increase. A separate motion shall be brought to establish the exact amount. Parties in interest should refer to the Plan for more information. If no separate motion is brought then attorney fees and costs through confirmation shall be \$3500.00 and all time and costs expended after confirmation shall be billed at an hourly rate and brought by separate motion.

Upon receipt of all or a portion of the flat fees the funds are property of Brown & Seelye and will not be put in a trust account. The fact that fees have been paid in advance does not affect my right to terminate the attorney/client relationship. In the event the relationship is terminated prior to the filing of the case I may or may NOT be entitled to a refund or a portion of the fee. I/we understand that all documents I provide will become the property of Brown and Seelye.

I agree that the Law Offices of Brown and Seelye have also provided me with copies of (1) Notice to Individual Consumer Debtor under Section 341(b) of the Bankruptcy Code; (2) 11 USC Section 527(a) Verbatim Notice; and (3) 11 USC Section 527(b).

Case No.		

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CHAPTER 7: Fees do NOT include the following and require an additional fee and in CHAPTER 13 these services will be billed through my Chapter 13 Plan as administrative expense at the rates listed above:

(1) Representation in any dischargeability actions. (2) JUDICIAL LIEN AVOIDANCES. (3) Relief from stay actions or any other adversary proceedings, garnishment notifications, post-petition amendments, drivers license suspension notification to DOL. (4) ANY MOTIONS OR RESPONSES TO MOTIONS including avoiding liens, redeem property, or responses to motions against me; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. (5) Bankruptcy Rule 2004 examinations (6) Motions to continue the Section 341 meeting of creditors and/or appearing for a continued Section 341 hearing (7) Assistance carrying out the Debtor's Statement of Intentions, monitoring an asset case, and reopening a bankruptcy case to submit post-filing proof of pre-discharge counseling. (8) Any postage or copy charges, including duplicate copies of any pleadings, schedules or notices (including additional copies of my bankruptcy and discharge orders) and the return of garnished funds (9) 2004 Examinations.

JUDICIAL LIENS: I understand it is my responsbility to check with all courts, assessors, and recorders to check for any and all liens, judgments, UCC filings. A lien remains on my house and real estate even after bankruptcy unless I pay an additioanl fee to have the lien removed and this is SPECIFCALLY not included in my bankruptcy fees.

POST PETITION GARNISHMENT SERVICES: Not included in the fees for Chapter 7 and 13 listed above are post garnishment services for post-filing actions taken on my behalf AFTER the filing of the bankruptcy which may include the possible request for return of garnished funds. Garnished funds can only be returned after the Trustee has abandoned their interest in them. If the Trustee chooses not take the funds then an attempt may or may not be made to have funds garnished over \$601 by the same creditor and up to 90 days prior to filing returned and I agree that the funds will be paid to Brown and Seelye who will deduct a 20% fee from the funds and return the remainder to me.

	CERTI	FICATION
I certify that the foregoing is a complete stater this bankruptcy proceeding.	ment of any agreemen	nt or arrangement for payment to me for representation of the debtor(s) in
June 10, 2019		/s/ Ellen Ann Brown
Date	Ellen Ann Brown 27992	
		Signature of Attorney Prown and Sooks
		Brown and Seelye 744 S Fawcett Ave
		Tacoma, WA 98402
		253-573-1958 Fax: 1-866-422-6196
		StopDebt@gmail.com
		Name of law firm
Date June 10, 2019	Signature	/s/ Tina Marie Wright
	8	Tina Marie Wright
		Debtor
Date June 10, 2019	Signature	/s/ Dorri Jamar Wright
	C	Dorri Jamar Wright
		Joint Debtor

United States Bankruptcy Court Western District of Washington

In re	Tina Marie Wright Dorri Jamar Wright		Case No.	
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR	R MATRIX	
The abo	ove-named Debtors hereby verify t	hat the attached list of creditors is true and	correct to the best	of their knowledge.
Date:	June 10, 2019	/s/ Tina Marie Wright		
		Tina Marie Wright		
		Signature of Debtor		
Date:	June 10, 2019	/s/ Dorri Jamar Wright		
		Dorri Jamar Wright		
		Signature of Debtor		

AEP SWEPCO 428 TRAVIS ST SHREVEPORT, LA 71101

ALLIANCE ONE PO BOX 11641 TACOMA, WA 98411

AT&T BANKRUPTCY DEPT P.O. BOX 6463 CAROL STREAM, IL 60197

CAPITAL ONE BANK PO BOX 60024 CITY OF INDUSTRY, CA 91716

CHEXSYSTEMS
ATTN: CUSTOMER RELATIONS
7805 HUDSON RD STE 100
SAINT PAUL, MN 55125

CITIBANK
P.O. BOX 6077
SIOUX FALLS, SD 57117

COMENITY
PO BOX 182273
COLUMBUS, OH 43218

COMMONWEALTH FIN SYS 245 MAIN ST SCRANTON, PA 18519

CREDITS INC 461 E MAIN ST HERMISTON, OR 97838

DIRECTV ATTN BANKRUPTCY CLAIMS PO BOX 6550 ENGLEWOOD, CO 80155

DYNAMIC COLLECTORS INC 790 S MARKET BLVD CHEHALIS, WA 98532 EQUIFAX PO BOX 30272 TAMPA, FL 33630

EXPERIAN
PROFILE MAINTENANCE
PO BOX 9558
ALLEN, TX 75013

FREEDOM ACCEPTANCE 1150 E LITTLE CREEK NORFOLK, VA 23518

GATEWAY ONE LENDING & FINANCE 1121 N ROBISON ROAD TEXARKANA, TX 75501

GATEWAY ONE LENDING & FINANCE 160 N RIVERVIEW DR #100 ANAHEIM, CA 92808

GORDON AYLWORTH & TAMI, PC ATTORNEYS AT LAW 4023 WEST 1ST AVE P.O. BOX 22338 EUGENE, OR 97402

HEALTHY FUTURE PEDIATRICS 3023 PACIFIC AVE SE OLYMPIA, WA 98501

IC SYSTEM
444 HWY 96 E
PO BOX 64887
SAINT PAUL, MN 55164

INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA, PA 19101

LABCORP 550 17TH AVE STE 300 SEATTLE, WA 98122 LVNV FUNDING
PO BOX 10497
GREENVILLE, SC 29603

MCM PO BOX 603 OAKS, PA 19456

MELISSA KOHLER ND, LAC 3624 ENSIGN RD NE SUITE B OLYMPIA, WA 98506

MIDLAND FUNDING 8875 AERO DR STE 200 SAN DIEGO, CA 92123

NELNET P.O. BOX 2970 OMAHA, NE 68103

OLYMPIA WOMENS HEALTH 403 BLACK HILL S LN SW OLYMPIA, WA 98502

PACLAB PO BOX 2670 SPOKANE, WA 99220

PORTFOLIO RECOVERY PO BOX 281532 ATLANTA, GA 30384

PORTFOLIO RECOVERY ASSCIATES 120 CORPORATE BLVD. NORFOLK, VA 23502

PROVIDENCE HEALTH PO BOX 34726 SEATTLE, WA 98124

PROVIDENCE HEALTH & SERVICES PO BOX 3177 PORTLAND, OR 97208

RED RIVER FCU PO BOX 5909 TEXARKANA, TX 75505

SEATTLE CHILDRENS HOSPITAL PO BOX 24049 SEATTLE, WA 98124

SOCIAL SECURITY ADMINISTRATION 402 YAUGER WAY SW OLYMPIA, WA 98502

SOUTH SOUND RADIOLIGISTS 3417 ENSIGN NE OLYMPIA, WA 98506

STATE FARM BANK PO BOX 87 DEPOSIT, NY 13754

SYNCHRONY BANK P.O. BOX 965037 ORLANDO, FL 32896

TRANSUNION 555 WEST ADAMS ST CHICAGO, IL 60611

WALMART
C/O GE MONEY BANK
ATTN: BANKRUPTCY DEPT
PO BOX 103104
ROSWELL, GA 30076